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Application Data Sheet 37 CFR 1.76		Attorney Docket Number	2329-00155
		Application Number	
Title of Invention	Spinal Ligament Modification Devices		
<p>The application data sheet is part of the provisional or nonprovisional application for which it is being submitted. The following form contains the bibliographic data arranged in a format specified by the United States Patent and Trademark Office as outlined in 37 CFR 1.76.</p> <p>This document may be completed electronically and submitted to the Office in electronic format using the Electronic Filing System (EFS) or the document may be printed and included in a paper filed application.</p>			

Secrecy Order 37 CFR 5.2

<input type="checkbox"/> Portions or all of the application associated with this Application Data Sheet may fall under a Secrecy Order pursuant to 37 CFR 5.2 (Paper filers only. Applications that fall under Secrecy Order may not be filed electronically.)
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Applicant Information:

Applicant 1				
Applicant Authority <input checked="" type="radio"/> Inventor		<input type="radio"/> Legal Representative under 35 U.S.C. 117	<input type="radio"/> Party of Interest under 35 U.S.C. 118	
Prefix	Given Name	Middle Name	Family Name	Suffix
	Donald		Schomer	
Residence Information (Select One) <input checked="" type="radio"/> US Residency <input type="radio"/> Non US Residency <input type="radio"/> Active US Military Service				
City	Englewood	State/Province	CO	Country of Residence i US
Citizenship under 37 CFR 1.41(b) i		US		
Mailing Address of Applicant:				
Address 1	20 Martin Lane			
Address 2				
City	Englewood	State/Province	CO	
Postal Code	80113	Countryi	US	
Applicant 2				
Applicant Authority <input type="radio"/> Inventor		<input type="radio"/> Legal Representative under 35 U.S.C. 117	<input type="radio"/> Party of Interest under 35 U.S.C. 118	
Prefix	Given Name	Middle Name	Family Name	Suffix
	Murray	D.	Solsberg	
Residence Information (Select One) <input type="radio"/> US Residency <input type="radio"/> Non US Residency <input type="radio"/> Active US Military Service				
City	Englewood	State/Province	CO	Country of Residence i US
Citizenship under 37 CFR 1.41(b) i		US		
Mailing Address of Applicant:				
Address 1	15 Huntwick Lane			
Address 2				
City	Englewood	State/Province	CO	
Postal Code	80113	Countryi	US	
Applicant 3				
Applicant Authority <input type="radio"/> Inventor		<input type="radio"/> Legal Representative under 35 U.S.C. 117	<input type="radio"/> Party of Interest under 35 U.S.C. 118	
Prefix	Given Name	Middle Name	Family Name	Suffix
	Bryce		Way	
Residence Information (Select One) <input type="radio"/> US Residency <input type="radio"/> Non US Residency <input type="radio"/> Active US Military Service				
City	Englewood	State/Province	CO	Country of Residence i US

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		Application Number	
Title of Invention	Spinal Ligament Modification Devices		

Citizenship under 37 CFR 1.41(b) ⁱ	US		
Mailing Address of Applicant:			
Address 1	226 Vista Roma Way		
Address 2			
City	San Jose	State/Province	CA
Postal Code	95136	Country ⁱ	US
All Inventors Must Be Listed - Additional Inventor Information blocks may be generated within this form by selecting the Add button.			
			<input type="button" value="Add"/>

Correspondence Information:

Enter either Customer Number or complete the Correspondence Information section below. For further information see 37 CFR 1.33(a).	
<input type="checkbox"/> An Address is being provided for the correspondence information of this application.	
Customer Number	23505
Email Address	<input type="button" value="Add Email"/> <input type="button" value="Remove Email"/>

Application Information:

Title of the Invention	Spinal Ligament Modification Devices		
Attorney Docket Number	2329-00155	Small Entity Status Claimed	<input checked="" type="checkbox"/>
Application Type	Nonprovisional		
Subject Matter			
Suggested Class (if any)		Sub Class (if any)	
Suggested Technology Center (if any)			
Total Number of Drawing Sheets (if any)	8	Suggested Figure for Publication (if any)	
Publication Information:			
<input type="checkbox"/> Request Early Publication (Fee required at time of Request 37 CFR 1.219)			
Request Not to Publish. I hereby request that the attached application not be published under 35 U.S.C. 122(b)			
<input type="checkbox"/> and certify that the invention disclosed in the attached application has not been and will not be the subject of an application filed in another country, or under a multilateral agreement, that requires publication at eighteen months after filing.			

Representative Information:

Representative information should be provided for all practitioners having a power of attorney in the application. Providing this information in the Application Data Sheet does not constitute a power of attorney in the application (see 37 CFR 1.32). Enter either Customer Number or complete the Representative Name section below. If both sections are completed the Customer Number will be used for the Representative Information during processing.			
Please Select One:	<input checked="" type="radio"/> Customer Number	<input type="radio"/> US Patent Practitioner	<input type="radio"/> US Representative (37 CFR 11.9)

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Application Data Sheet 37 CFR 1.76		Attorney Docket Number 2329-00155
		Application Number
Title of Invention	Spinal Ligament Modification Devices	
Customer Number	23505	

Domestic Priority Information:

This section allows for the applicant to claim benefit under 35 U.S.C. 119(e), 120, 121, or 365(c). Providing this information in the application data sheet constitutes the specific reference required by 35 U.S.C. 119(e) or 120, and 37 CFR 1.78(a)(2) or CFR 1.78(a)(4), and need not otherwise be made part of the specification.

Prior Application Status	<input type="button" value="Remove"/>		
Application Number	Continuity Type	Prior Application Number	Filing Date (YYYY-MM-DD)
	a 371 of international	PCT/US2005/02	2005-07-29
Prior Application Status	<input type="button" value="Remove"/>		
Application Number	Continuity Type	Prior Application Number	Filing Date (YYYY-MM-DD)
		60592099	2004-07-29

Additional Domestic Priority Data may be generated within this form by selecting the Add button.

Foreign Priority Information:

This section allows for the applicant to claim benefit of foreign priority and to identify any prior foreign application for which priority is not claimed. Providing this information in the application data sheet constitutes the claim for priority as required by 35 U.S.C. 119(b) and 37 CFR 1.55(a).

<input type="button" value="Remove"/>			
Application Number	Country ⁱ	Parent Filing Date (YYYY-MM-DD)	Priority Claimed
			<input checked="" type="radio"/> Yes <input type="radio"/> No
Additional Foreign Priority Data may be generated within this form by selecting the Add button.			

Assignee Information:

Providing this information in the application data sheet does not substitute for compliance with any requirement of part 3 of Title 37 of the CFR to have an assignment recorded in the Office.

Assignee 1

If the Assignee is an Organization check here.

Organization Name X-STEN

Mailing Address Information:

Address 1	20 Martin Lane		
Address 2			
City	Englewood	State/Province	CO
Country ⁱ	US	Postal Code	80113

Phone Number

Fax Number

Email Address

Additional Assignee Data may be generated within this form by selecting the Add button.

Application Data Sheet 37 CFR 1.76		Attorney Docket Number 2329-00155
		Application Number
Title of Invention	Spinal Ligament Modification Devices	

Signature:

A signature of the applicant or representative is required in accordance with 37 CFR 1.33 and 10.18. Please see 37 CFR 1.4(d) for the form of the signature.

Signature	/mwatkins/	Date (YYYY-MM-DD)	2006-04-26
First Name	Marcella	Last Name	Watkins
		Registration Number	36,962

This collection of information is required by 37 CFR 1.76. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 23 minutes to complete, including gathering, preparing, and submitting the completed application data sheet form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.